MODIFIED PTO/S8/96 (07-99)
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STATEMENT UNDER 37 C.F.R. 3.73(b)	
Applicant/Patent Owner: Patrick A. Hawkins Application No./Patent No.: 10/642,960 Titled: MOUNTING DEVICE	Attorney Docket No558.008US1
Pipe Pier     , a Corporation       (Name of Assignee)     (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)	
States that it is:	
1. $\boxtimes$ the assignee of the entire right, title, and interest in;	
<ol> <li>an assignee of less than the entire right, title, and interest in (The extent (by percentage) of its ownership interest is</li></ol>	
3. In the assignee of an undivided interest in the entirety of (a complete assignment from one of the joint inventors was made)	
the patent application/patent identified above, by virtue of either:	
A.  An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 014408. Frame 0112 - 0114, or for which a conv therefore is attached.	
OR  A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as follows:  1. From:  To:  The document was recorded in the United States Patent and Trademark Office at	
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Additional documents in the chain of title are listed on a supplemental sheet(s).	
As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of title from the original owner to the assignee was, or concurrently is being, submitted for recordation pursuant to 37 CFR 3.11.  [NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, to record the assignment in the records of the USPTO. See MPEP 302.08]	
The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.	
125 C. Proto	July 19, 2010
Signature Date	
Matthew L. Prater Printed or Typed Name	USPTO Reg. No. 61,891 Title

Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1490, Alexandria, V.A. 22313-1450. DOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patients, P.O. Box 1490, Alexandria, V.A. 22313-1450.

MODIFIED PTO/SB/80 (11-08)

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## I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b). I hereby appoint: Practitioners associated with the Customer Number: 21186 Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used. Registration Registration Name Name Number Number as altomey(s) or agenl(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3,73(b). lease change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to: The address associated with Customer Number: 21186 Firm or Individual Name Address State Zip City Country Email Telephone Assignee Name and Address: Pine Pier 2340 Niagra Ln. N. Plymouth, MN 55447 United States of America A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee Signature: Date: lip

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Telephone: N/A

Patrick

Name: Title:

Hawkin S